Infant mortality 1998



In 1998, South Carolina's infant death rate was 9.5 deaths per 1,000 live births. The rate continues at the same level as the 1997 rate of 9.5.

In 1998, 511 infants died in South Carolina before their first birthday for an infant mortality rate of 9.5 infant deaths per 1,000 babies born to resident South Carolina mothers. There were 494 infant deaths in 1997.

The 1998 overall rate of 9.5 remained unchanged from the 1997 rate. However, the rate among "black and other" infants increased slightly for the second consecutive year, from 15.0 in 1997 to 15.5 in 1998, an increase of 3.2 percent. The rate among whites decreased by 4.8 percent, from 6.3 deaths per 1,000 live births in 1997 to 6.0 in 1998.

Although there was a decrease in the infant mortality rate for "black and other" infants having very low birth weights (less than 3 pounds 5 ounces) in 1998 compared to 1997, there was an increase in the rate among "black and other" infants of intermediate low birth weight (3 pounds 5 ounces – 5 pounds 8 ounces). The increase in the rate for this intermediate low birth weight group contributed to the overall "black and other" infant mortality rate increasing by 3.2 percent from 1997 to 1998. The 4.8 percent decrease in the white infant mortality rate from 1997 to 1998 is the result of a decrease in the mortality rate among all birth weight categories. Other factors contributing to the overall infant mortality rate include congenital anomalies, short gestation, Sudden Infant Death Syndrome and adverse maternal conditions.

The 1998 South Carolina's infant mortality rate was 1.32 times higher than the provisional U.S. rate of 7.2 per 1,000 live births. Like South Carolina's infant mortality rate, the U.S. provisional rate remained unchanged from the 1997 rate.

Despite the unchanged statewide rate, 17 of South Carolina's 46 counties (37 percent) showed decreased infant mortality rates from 1997 to 1998. Twenty-eight

counties (61 percent) showed increased infant mortality rates from 1997 to 1998. One county (2 percent) showed an unchanged infant mortality rate from 1997 to 1998.

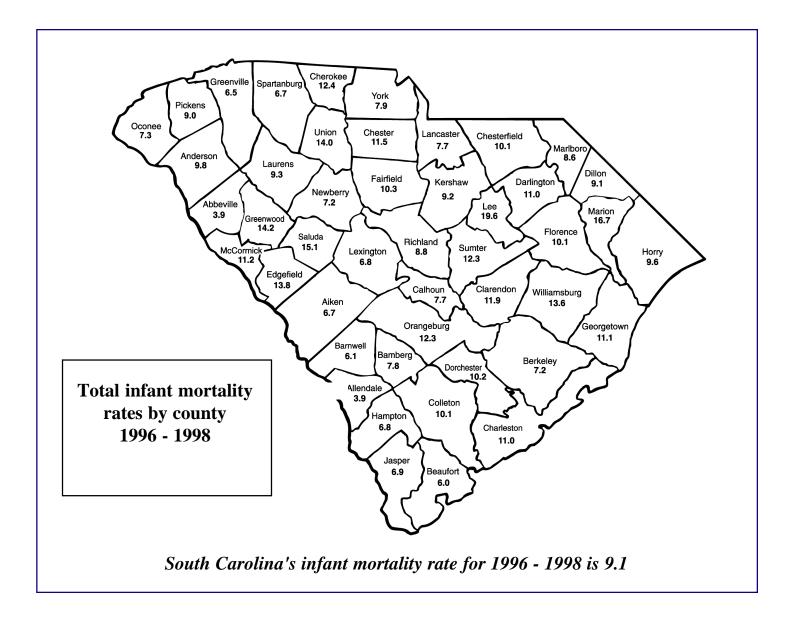
The unchanged rate is a reminder to all South Carolinians that we must diligently work together as partners to ensure that women begin a pregnancy healthy, receive early and continuous prenatal care, and that every baby born in our state has the best opportunity at life. Many people, agencies and organizations contribute to this effort.

1998 marks the 10th year of improvement in the percentage of women entering prenatal care early. In 1998, 80 percent of pregnant women started prenatal care during the first three months of their pregnancy as compared to 79 percent in 1997 and 78 percent in 1996. However, mothers of infants who died in 1998 were significantly less likely to enter care early.

Prenatal care participation has improved because of 1) expanding partnerships, with the public partner providing Family Support Services to complement the private partner's medical care, 2) improvements in the Medicaid program, 3) improvements in reporting and 4) outreach to make women aware of the need for prenatal care such as the Governor's Office program, "Caring for Tomorrow's Children and the CareLine, a toll-free hot line.

Challenges ahead include educating parents and all care givers about how to reduce the risk of Sudden Infant Death Syndrome by always putting a baby on its back to sleep, keeping a smoke-free area, and using firm bedding. Additionally, many of the risk factors implicated as main contributors to infant mortality can be minimized or eliminated when identified before pregnancy begins. Increasing the awareness of starting a pregnancy healthy is essential, as the first five weeks of pregnancy are the most critical time in fetal development.

In 1998, the percentage of infants born weighing less than 2,500 grams (less than 5 pounds 8 ounces) was 9.6 percent. For mothers whose infants died in 1998, this percentage was over 70 percent. These premature and smaller babies are at high risk of dying, developing chronic illnesses and conditions, and suffering from developmental



delays and learning problems. More than 26 percent of women giving birth to liveborn infants in 1998 received less than adequate prenatal care. Because inadequate care is associated with increased risk of complications in childbirth and in the neonatal and postneonatal periods, improvements in both access to and use of maternal and pediatric services may lead to the early detection and prevention of problems for both the mother and the infant.

CareLine is a toll-free statewide hot line to help South Carolina women get access to prenatal care, infant care, family planning services, and related services. The telephone number is 1-800-868-0404.

For more information on the state's infant mortality rate, contact (803) 898-0742.



South Carolina Department of Health and Environmental Control

- The white infant mortality rate for 1998 is 6.0 deaths per 1,000 live births, a 4.8 percent decrease from 1997's 6.3 rate.
- The black and other infant mortality rate increased from 15.0 deaths per 1,000 live births in 1997 to 15.5 in 1998, a 3.3 percent increase.
- The mortality rate for the neonatal period (up to 28 days after birth) remained the same from 1997 to 1998.
- The mortality rate for the postneonatal period (from 28 days after birth up to one year of life) increased 3.7 percent from 1997 to 1998.

March 2000

ML#017016